

## APPLICATION DATA SHEET

### Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)? No

Number of Copies of CRF::

Title:: PROCESS AND PLANT FOR THE  
TREATMENT OF THE GLASS SHEETS OF AN  
ASYMMETRIC GLASS-SHEET PAIR

Attorney Docket Number:: 021500-142

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 3

Small Entity?: No

Latin Name::

Variety Denomination Name::

Petition Included?: No

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?: No

### **Applicant Information**

Applicant Authority Type: Inventor

Primary Citizenship Country: Germany

Status: Full Capacity

Given Name: Dieter

Middle Name:

Family Name: FUNK

Name Suffix:

City of Residence: Witten

State or Province of Residence:

Country of Residence: Germany

Street of Mailing Address: Schutzenstrasse 16

City of Mailing Address: Witten

State or Province of Mailing Address:

Country of Mailing Address: Germany

Postal or Zip Code of Mailing Address: D-58452

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Joachim
Middle Name::	
Family Name::	PILZ
Name Suffix::	
City of Residence::	Gelsenkirchen
State or Province of Residence::	
Country of Residence::	Germany
Street of Mailing Address::	Stegemannsweg 99
City of Mailing Address::	Gelsenkirchen
State or Province of Mailing Address::	
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	D-45897
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Peter
Middle Name::	
Family Name::	MICHELS
Name Suffix::	
City of Residence::	Sprockhovel

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Am Kindler 1

City of Mailing Address:: Sprockhovel

State or Province of Mailing  
Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing  
Address:: D-45549

### **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/EP2004/002980	03/22/04

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
Germany	103 14 400.5	03/28/03	Yes

## **Assignee Information**

Assignee Name::	Pilkington Automotive Deutschland GmbH
Street of Mailing Address::	Otto-Seeling-Str. 7
City of Mailing Address::	Witten
State or Province of Mailing Address::	
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	D-58455